

IT Proposal Definition

Integrated Licensing and Regulatory System

December 7, 2004
Version 6.3



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EXECUTIVE SUMMARY

Description and Purpose

This proposal seeks to purchase a single off-the-shelf licensing and regulatory system for Health Systems Quality Assurance (HSQA), to replace and consolidate three outdated legacy licensing systems; ASI: a Unix based CISAM system that supports the Health Professions Quality Assurance Program (HPQA), The Facilities Services and Licensing (FSL) system: a FoxPro Client Server system that supports the Facilities Services and Licensing (FSL) Program, an application/database system that supports the Office of Emergency Medical Services and Trauma System (OEMSTS), and BATS: a recently developed Business Administrative Tracking System used to track disciplinary timelines in compliance with a legislative mandate, as well as comply with a federal mandate for reporting all disciplinary actions taken against Health Care Providers to the National Healthcare Integrity Protection Databank (HIPDB). BATS is the core database for all disciplinary work done within HPQA – to include the Provider Look-up web-site. While it is predominantly used by HPQA, it also produces billing reports from the Adjudicative Services Unit (ASU) to FSL and OEMSTS. This new system may also support the Office of Community and Rural Health (OCRH) coordination and data requirements. HSQA program areas are conducting extensive business area analysis to clearly identify the requirements for each.

HPQA is charged with protecting public health and safety by regulating the competency and quality of over 271,000 credentialed health care providers. The HPQA mission is to “Strive to protect the people of Washington State by establishing healthcare standards and regulating healthcare professionals. The office works in partnership with 12 boards, 4 commissions, and 9 advisory committees in the regulation of 57 health care professions.

FSL works with medical, health, child and residential care providers, medical test sites, state agency health care institutions, lodging establishments and the state ferry system to assure an acceptable level of safety and health in over 7,000 facilities and services throughout Washington State.

OEMSTS is responsible for developing systems that assure accessible and timely treatment for victims of acute illness or trauma and currently license 17,000 medical professionals and 600 services throughout Washington State.

OCRH provides assistance to community-based initiatives to strengthen health care delivery systems in rural and underserved urban communities. The assistance is focused on activities necessary to recruit and retain health care personnel, support health care delivery system infrastructure, and assure access to health care.

Scope

Acquire, deploy, maintain and support a single licensing and regulatory system, as identified in the requirements analysis and feasibility study, that will enable the Department of Health, HSQA Division to provide a licensing and disciplinary/enforcement system for health care professionals and facilities within the state of Washington. The scope of this project includes:

- Business Area Analysis
- Feasibility Study
- Investment Plan
- RFQQ and selection of software vendor

- Selection of a Project Manager
- Hardware Procurement and IT Staff Training
- Data Cleanup
- Acceptance of new system
- Data Conversion and Testing
- Interfaces with other state and federal systems
- Implementation and Training
- User and System Documentation
- Review and Final Report

Benefits

Benefits of the proposed system include:

- Improved efficiency by eliminating collection, data entry, and maintenance of redundant data
- Increased consistency and tracking through use of system-wide rules
- Enhanced system edits, reducing data entry errors
- Improved reporting capability
- Improved ability to meet legislative and federal timelines and mandates
- Increased staff efficiency through automation of repetitive production processes
- Elimination of side systems for management of the complaint and disciplinary process
- Ability to link licensed facilities and licensed providers for improved assessment and coordination among program areas
- Improved historical licensing and complaint investigation log for accountability
- Ability to interface electronically with existing federal programs
- Improved public access to vital health care information via the web
- Increased system reliability through replacement of outdated technology
- Addition of financial reconciliation processes to comply with state audit requirements

Resource Estimates: Cost and FTEs

Preliminary Project Cost Estimates

	Project Cost by SFY				Total Cost
	Jan 2004 - Jun 2004 -	Jul 04 - Jun 05 -	Jul 05 - Jun 06 -	Jul 06 - Jun 07 -	
Total Project Cost	\$133,500	\$350,000	\$1,888,500	\$1,328,800	\$3,700,800

Note: Costs do not include Agency or Division Indirects

Preliminary Life Cycle & Maintenance Cost Estimates

	5 Year Maintenance Cost					Total 5 Yr Cost
	Jul 07 - Jun 08 -	Jul 08 - Jun 09 -	Jul 09 - Jun 10 -	Jul 10 - Jun 11 -	Jul 11 - Jun 13 -	
Total Maintenance Cost	\$168,000	\$168,000	\$168,000	\$168,000	\$168,000	\$840,000

Note: Costs do not include Agency or Division Indirects

FTEs: Approximately 8-9 project FTEs will be required for this project.

Note 1: Please reference APPENDIX F: Project and Lifecycle Cost Estimates for detailed cost estimates.

Note 2: The Feasibility Study will provide a detailed cost benefit analysis. It is the assumption of this proposal that the current HSQA IT staff will maintain the new system.

Schedule

The following schedule is identified for this proposal. Detailed milestones and tasks will be managed according to the schedule identified in Appendix C, Project Plan.

Business Proposal

May 2004 - June 2004

- Create Information Technology Proposal (ITP)
- Review Business Functions and Process Flows (BAA)
- Create initial timelines and costs for project
- Create communication plan
- Complete ITP and obtain DOH authorizations for project

Decision Package

May 2004 - June 2004

- Complete BAA
- Develop Decision Package
- Develop initial Funding and Investment Strategy
- Develop ITP Portfolio
- Conduct initial briefing to DIS and OFM

Project Management - July 2004

- Select Project Manager
- Select Business Manager
- Select Quality Assurance Vendor

Feasibility Study

July 2004 - December 2004

- Create Final Investment Strategy for DOH, OFM, and DIS
- Review RFI from FSL study of September 2002
- Create Timeline and Project Costs
- Develop Initial Data Cleaning Plan
- Develop Payment Strategy
- Develop Investment Plan (subset of Feasibility Study)
- Obtain Authorizations (ISB and OFM) to Continue Project

Implementation Strategy

July 2004 - Jun 2005

- Finalize Data Cleanup Strategy
- Develop Initial Data Conversion Strategy
- Develop Initial Training Strategy
- Revise Project Timeline as needed
- Finalize Communication Plan

Prepare Outsource Contract for RFQQ and Evaluation

RFQQ

July 2005 – November 2005

- Develop and Release RFQQ
- Develop Evaluation Criteria
- Evaluate RFQQ Responses
- Select Software Vendor
- Sign Contract

Procurement of Hardware and Software

November 2005 –December 2005

- Procure Hardware
- Modify Implementation Timeline & Project Costs based on vendor selection
- Finalize Data Cleanup Plan

Data Conversion, Testing, and Implementation

January 2006 – June 2007

- Implement Software in test environment
- Acceptance of System
- Run Test Cases
- Convert Data for Implementation
- Finalize Training Plan and classroom environment
- Develop Training Materials
- Finalize Implementation Plan
- Implementation and Training

Repeat converting data, training user, running in production until all the professions and facilities have been converted and moved into production.

Review

June 2007

- Lessons Learned
- Archive old system
- Close Project
- Celebrate Success

Proposed Technology

- DOH Technology Standards will be used to for this project
- Database will be MS SQL 2000 or higher running on a Windows 2000 server platform or higher.
- Data entry will be accomplished with either client server technology or a web-based application using Active Server Pages, VB and Java script along with COM+ technology or equivalent .Net framework components and methodology.
- Data Junction, along with scripts developed in-house, will be used to accomplish data scrubbing and conversions.

Oversight and Sponsorship

This proposal is assessed at medium risk and severity, **Level 2**, and is sponsored by Laurie

Jenkins, Acting Assistant Secretary, Health Systems Quality Assurance. Sue Shoblom, HSQA Chief Administrator, serves as the project champion.

Risk Assessment – Medium

Functional impact on business processes or rules – High

Development effort and resources – Medium

Technology – Medium

Capability & management: Medium

Severity Assessment – Medium

Impact on clients – High

Visibility – High

Impact on state operations – Low

Failure or nil consequences – Medium

Risk and Severity rating for this project is **Level 2** and may require a feasibility study, requires DIS executive approval, optional approval and oversight by the Information Services Board, optional prototype (at ISB discretion), and optional external quality assurance.

Alignment with Goals

DOH strategic planning goals include:

- Goal 1. Improve health outcomes for the people of Washington State.
- Goal 2. Enhance the public health system.
- Goal 3. Increase focus and funding alignment on core mission activities.
- Goal 5. Improve external and internal customer service.
- Goal 6. Improve internal and external communications.
- Goal 7. Increase effectiveness and efficiency through process improvement and performance measurement.
- Goal 9. Enhance management and use of public health information.

This proposal is currently included in the [DOH Information Technology Portfolio](#) as a planned investment.

BACKGROUND AND NEEDS ASSESSMENT

Business environment

A Department of Health (DOH) mission critical function is the licensing and regulation of health practitioners and health care facilities, including setting standards for entrance into the profession or for operation of a health care facility. This involves the licensing of health practitioners, facilities, managing consumer complaints, and monitoring disciplinary compliance plans.

Health Systems Quality Assurance (HSQA), currently has three outdated legacy licensing systems; a Unix based CISAM system that supports the Health Professions Quality Assurance Program (HPQA), a FoxPro Client Server system that supports the Facilities Services Licensing (FSL) Program, a proprietary application/database system that supports the Office of Emergency Medical Services and Trauma System (OEMSTS), and a recently developed Business Administrative Tracking System (BATS) that also supports HPQA. BATS was developed to overcome many of the shortfalls identified with ASI as well as respond to external mandates. It is used to track disciplinary timelines in compliance with a legislative mandate, as well as comply with a federal mandate for reporting all disciplinary actions taken against Health Care Providers

to the National Healthcare Integrity Protection Databank (HPDB). BATS is the core database for all disciplinary work done within HPQA – to include the Provider Look-up web-site. While it is predominantly used by HPQA, it also produces billing reports from the Adjudicative Services Unit (ASU) to FSL and OEMSTS.

The following background information highlights the previous separate steps taken by three offices within HSQA to initiate new systems:

- In early 1997 the Department of Health was approved by OFM and the Department of Information Services to purchase a licensing and disciplinary system to replace the current legacy system. The Information Services Board provided oversight to this project.
- Subsequently, HPQA initiated an RFP to implement a new system. In January 1998, System Automation Corporation was announced as the apparent successful vendor.
- In 1997, OEMSTS upgraded their system, converting the previous single-user DOS application to a Windows-based, multi-user version. Although the system has met the core functional needs of the program, it remains unable to electronically check discipline records of providers cross-credentialed in other programs within HSQA.
- From January 1998 through June 1999, the Department of Health sought negotiation of a contract with Systems Automation. An external quality assurance consultant (Sterling & Associates) and a contract lawyer recommended by DIS aided in this process. DOH was unable to reach an agreement with Systems Automation. Issues included ownership of source code for the LICENSE 2000 application, inability to quantify a cost for all of the modifications needed (NOTE: Almost all of the modifications required were in the disciplinary component), concerns with the financial stability of the company, and its ability to deliver a quality product on time.
- In 1998, Washington State enacted legislation requiring HPQA to define each step of the adjudicative process, and create a set of timelines for processing a complaint from intake through the final adjudication. The shortcomings of the current information system (ASI) made this mandate impossible without development of a new tracking system.
- In 1999, a federal mandate became effective requiring the reporting of all disciplinary action taken against a health care practitioner to the National Healthcare Integrity Protection Data Bank (HIPDB). Again, due to limitations in the current information system (ASI), a separate reporting system was required to be developed.
- In March 2000, the original HPQA project was cancelled but the underlying need for a new licensing and disciplinary system remained. In order to meet the mandates stated above, as well as respond to internal business changes, HPQA pursued internal development of a separate disciplinary tracking component, known as the Business Administrative Tracking System (BATS).
- In September 2000, FSL initiated a Business Area Analysis (BAA) project that concluded in December 2001. The BAA project team developed Functional Models, Workflow

Diagrams, and Conceptual Data Models to extract functional requirements statements from these deliverables, to make observations and recommendations for business re-engineering opportunities and to develop recommendations for the “Next Steps”. The objectives of this effort would serve as the foundation for an RFI and the subsequent replacement of the current FSL database application. This effort also marked the beginning of coordination between FSL and HPQA with the intent of purchasing a single licensing application that would serve both Offices, replacing the licensing component of ASI and allowing the new system to be matched up with BATS to form an integrated licensing and disciplinary system for HPQA.

- In September 2002 FSL released a preliminary Request for Quote and Qualifications (RFQQ) to determine what Commercial Off The Shelf (COTS) products were available in the market place that would address the functionality for the Office of Facilities & Services Licensing. FSL evaluated the responses and invited the top 5 vendors to conduct demonstrations of their software products. After reviewing the product demonstrations, FSL concluded that COTS solutions: 1) were more advanced and robust than earlier product assessments; 2) would provide at least 85% or higher of the requirements; and 3) could provide an enterprise agency wide licensing and disciplinary system.
- In January 2003 the HSQA executive management made the decision to consolidate the HPQA, FSL, and EMS licensing project efforts into a single HSQA enterprise solution.
- In January 2004 HSQA began development of a consolidated BAA from HPQA, FSL, EMS, and OCRH program areas which is anticipated to be complete by June 2004.

The nature of the services to be provided to the end user of the system

- ☐ Static Data
- ☒ Interactive Queries
- ☒ Data Entry
- ☐ Electronic Payments
- ☒ Reports
- ☐ Other

Nature of the proposed application and data:

1. What kind of data is housed in the application/database? Licensing and disciplinary/enforcement information for health care professionals and facilities within the state of Washington

2. What is the confidentiality or sensitivity level of its data? (If yes, add brief description to further explain.)

Y/N

- ☒ Does it contain any medical information? As disclosed by applicant or complainant
- ☒ Does it contain any personally identifiable data? SSN, Birthdays, Address information
- ☒ Are there any specific laws or regulations that prohibit the release or compromise of any components of this data? State and DOH Public Disclosure Policies and Regulations.

3. In which environment will the application live?

- ☐ DOH Internal network

- ☐ DOH Internal web site
- ☐ DOH external public web site
- ☐ DOH external protected web site (DMZ)
- ☒ Unknown – Depending on vendor selection, anticipate DOH internal network or web site

4. Who and how many users will have direct access to the application or data?
- ☒ Internal staff: 300
 - ☒ External trading partners: Public viewing of medical provider and medical facility information from a web application database separated from the main data and application system. (same architecture as the current HPQA and FSL web lookup systems)
5. What will the application or new function(s) do?
- The new application functions include licensing and disciplinary/enforcement information for health care professionals and facilities within the state of Washington. Internal data transfers are estimated to be less than the current 8,000/day user interaction transfers because of the redundant data entry on older systems
6. What type of data transfers (inputs/outputs) are associated with the application? (If yes, add brief description to describe the data being transferred.)
- Y/N**
- ☒ Inputs originate from external trading partners
 - ☒ Outputs sent to external trading partners. Daily uploads from BATS and FSL database to the current Provider Lookup and “CRS web application. Weekly uploads from the FSL Laboratory database of proficiency testing data to external partners. Monthly uploads BATS to HIPDB
7. What security (protection/encryption) requirements exist for the application/data transfer?
- Please provide known requirements, “none” or “unknown” for both application and data transfers.
- Application: unknown
- Data transfers: 128 BIT SSL for HIPDB_____
8. What level of authentication is planned for the application/data transfer?
- ☐ None
 - ☒ User-ID and password
 - ☐ Digital certificate
 - ☒ Other (describe) _Depending on vendor selection and complying with DOH Security Policy
 - ☐ Unknown

A more comprehensive description of the current environment is provided in APPENDIX A: CURRENT SYSTEM; The “Before” picture

Business needs and Opportunities:

- Implementation of a single automated system to meet the business requirements of three separate offices;
- Implementation of an automated system consistent with DIS and DOH information technology standards and strategic direction;

- Procurement of a generic system with the potential for use by other DOH regulatory programs;
- Enhanced capability for data sharing with other DOH programs and agencies;
- Enhanced tracking of DOH complaint process performance;
- Ability to provide ad hoc reporting capability for licensing, complaint, and compliance information;
- Reduced dependence on paper files and increased ability for electronic document storage;
- Improved compliance with privacy and confidentiality laws; and
- Improved tools for managing accountability and productivity of staff.

Business service goals

- Ability to track complaints in a more efficient and expedient manner
- Ability to facilitate workload assessment for the management of both licensing and disciplinary activities resulting in improved service to the applicants for licenses and current licensees.
- Improved communication and coordination between staff and programs
- Elimination of redundant processes and data entry
- Enhanced service delivery to the public and to the licensed health professionals with additional “on-line” services
- Ability to resolve audit concerns in the reconciliation of fees to services and products

Statutory requirements

This project will support both state and federal legislative requirements to regulate Health Care professions, facilities and services. Statutory provisions:

- Health Professions Quality Assurance
 - Chapter 18.04 through 18.83 RCW
 - Chapter 18.130 RCW
 - Chapter 69.41 RCW
- Facilities Services and Licensing
 - Chapter 70.41 RCW
 - Chapter 70.62 RCW
- Emergency Medical Services and Trauma Systems
 - Chapter 18.71 RCW
 - Chapter 18.73 RCW
 - Chapter 18.76 RCW
 - Chapter 70.168 RCW

BUSINESS OBJECTIVES

Improve the division’s ability to fulfill mandated health protection activities in the following ways:

- Replace three outdated legacy systems with a single Licensing and Regulatory system
- Eliminate dual and triple data entry into multiple systems to reduce work and improve consistency
- Eliminate errors due to insufficient system edits
- Provide direct easy access to basic data for all division personnel
- Improve the timeliness and efficiency of reporting and tracking of activities
- Provide issue and status information to improve communication and business

- management
- Enhance the capability for data sharing within DOH and other agencies
- Improve the clarity of the decision-making structure and process
- Align Information Systems with DOH technology standards
- Identification of violations of law or rule through correlation of data from different program areas
- Improve the timely management information regarding program efficiency and effectiveness
- Improve quality and reliability of recorded information
- Provide for financial reconciliation to business outputs

IMPACTS

Impact on stakeholders/customers:

While there is no direct system data entry by external partners or stakeholder, these groups are users of the data:

- Professional boards, commissions and committees;
- Professional associations (i.e. Washington State Medical Association, Hospital Association, Nursing association)
- Health care providers (i.e. paramedics, chiropractors, dentists, pharmacists)
- Hospitals and emergency medical organizations

There is no direct change in how boards, commissions or committees function, however, the system will result in more timely and accurate reporting for improved decision-making. There is no direct impact to other state or federal agencies for system such as HIPDB, ASPEN, however, the new system will need to continue to interface with these external systems

Impact on originating DOH program:

The proposed project will affect DOH staff including:

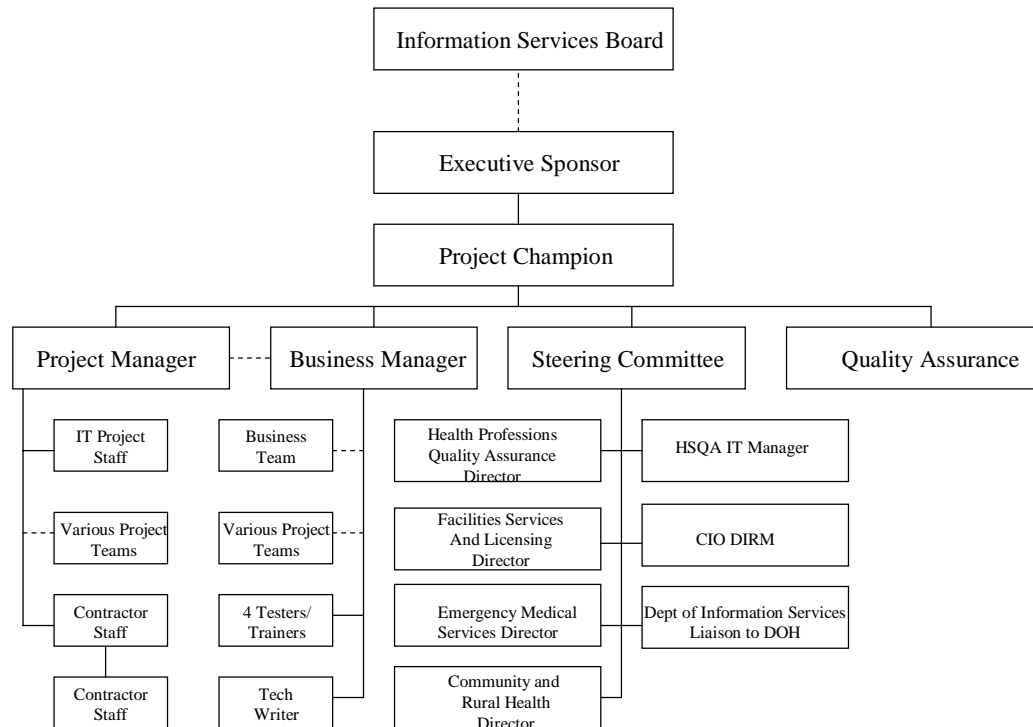
- Program staff will be expected to transition to a new automated system and will receive training on the new system
- Program staff will be heavily involved in establishing system requirements and rules
- Program staff will be heavily involved in establishing test scenarios and conducting testing
- Business system standards and change management will be centralized
- HSQA staff will no longer support network/infrastructure elements; DIRM will assume those responsibilities
- Basic training in SQL and system configuration is needed as well as specific training in the front-end software for HSQA IT staff
- An existing FTE is expected to shift into the business manager position.

PROJECT MANAGEMENT

The HSQA Licensing Project will be managed within the Division of Health System Quality Assurance in the Department of Health. The Project Manager will report to both the Project Champion and the HSQA IT manager for day-to-day operational issues. The Project Manager will be responsible for the overall planning, completion of project activities, and the deliverables identified within the project plan. Other individuals will be given specific areas of responsibility within the project and will be accountable to the Project Manager for accomplishing these in a timely manner. A Business Manager will report to the Project Champion for day-to-day project

business issues. Project roles and responsibilities can be found in Appendix C: Project Plan.

HSQA Project Organization



Oversight

Level 2 projects may require a feasibility study, DIS executive approval, approval and oversight by the Information Services Board, optional prototype (at ISB discretion), and external quality assurance.

A Steering Committee has been created to provide project oversight and policy direction.

WORK PLAN/PROJECT PLAN & DELIVERABLES

See Appendix C

APPENDIX A: CURRENT SYSTEM

Identification

ASI Health Care Professionals Licensing System

Description of current system or situation

The current system has little to no system edits and requires a separate CISAM database for each profession in order to implement profession-specific rules, because each profession requires its own database. Those holding multiple credentials must have personal information (i.e., Name, SSN, DOB, Address) entered multiple times. Users must use a Telnet client to access the system. All system processes are installed on the server, and every product generated (renewals, reports, etc..) must be installed by the system administrator. The current system also requires a dedicated UNIX administrator.

- Current system details:
 - There are no interfaces to external systems (other agencies, etc.).
 - Total size of data (e.g. database or total size of files/ documents): 4,000 MB
 - Annual rate of growth (percentage of data expansion/yr): 8 %
 - Record retention period (when data is archived/purged from system): 70 yrs
 - Record retention archive method:
 - ☐ Automated
 - ☒ Manual
- System does not use a Geographic Information System (GIS), e.g. to analyze geographic attributes or spatial relationships.
- Data is not displayed on a hard copy or web-enabled map.

Support concept

Following is an overview of the support concept for the current licensing system:

- HSQA IT personnel maintain the application, database structure, and data.
- The application and database are designed to operate in an IBM RS6000 environment, with the operating system being UNIX. The database is CISAM resides in the DOH data center, located at Town Center in Tumwater.
- Telnet is required for user access to the system.
- Record retention schedules will vary dependent upon the type of data involved.
Responsibility for ensuring the appropriate schedules are adhered to remain with HSQA IT.

Description of needed changes

Replacement of a system that is over 15 years old utilizing a index file database system to:

- Align with the agency's strategic direction for database management systems
- Align with the agency's strategic direction for application programming languages
- Reduce support requirements
- Provide a system capable of growth and scalability
- Provide a system capable of linking all credentials held by single practitioner
- Eliminate multiple data entry for demographic data pertaining to practitioners who hold multiple credentials
- Automate system-wide recurring business functions:
 - Batch processing of revenue upload

- Batch processing of credential print
 - Batch processing of recurring reports
- Provide for system edits to ensure data integrity, security, confidentiality, and reconciliation of financial transactions
- Consolidate separate systems tracking, licensing, disciplinary and compliance activities on single providers.

Assumptions and constraints

- Funds will be available and/or spending authority appropriated
- Legislative changes will not significantly impact the project scope
- Business process changes will be required
- Availability and commitment of business and technical staff
- Senior management is committed to support the project
- Agency IT staff will work in partnership

Identification

BATS Application Tracking System (BATS)

Description of current system or situation

The current system is a relational database that consists of a series of related applets formed around a core database structure. Basic licensing demographic data from ASI is compiled on a daily basis from each of the separate ASI databases, then reconfigured into one relational database. The core applets found within BATS are:

- HPQA Timelines Tracking System (HTTS) – HTTS was developed in response to a legislative mandate to be able to track a disciplinary case through the entire process from Intake and Assessment to final Adjudication.
- Healthcare Integrity and Protection Databank (HIPDB) – HIPDB was developed to allow automated collection and reporting of disciplinary actions to a federally mandated databank.
- Detailed Case Tracking and Cost Recovery System (DCTCRS) – DCTCRS was developed primarily to allow billing by the Office of Professional Standards (OPS), Investigative Units and Legal Units, for time spent on disciplinary cases.
- Docket Number Generator – Developed to allow for the system generation of Docket Numbers.
- Provider Look-up – A web-based application that allows the general public to review the credential status of their provider, and produce redacted copies of documents related to the disciplinary actions taken against a provider
- Current system details:

There are interfaces to external systems (other agencies, etc.). Files are transferred to the following organizations: Federation State Medical Board, Department of Social and Health Services (DSHS) MMA, American Medical Association, and the federal Health Integrated Protection Data Base (HIPDB).

Total size of data (e.g. database or total size of files/ documents): 35,000 MB

Annual rate of growth (percentage of data expansion/yr): 8 %

Record retention period (when data is archived/purged from system): 70 yrs

Record retention archive method:

- ☐ Automated
- ☒ Manual

- System does not use a Geographic Information System (GIS), e.g. to analyze geographic attributes or spatial relationships.
- Data is not displayed on a hard copy or web-enabled map.

Support concept

The following is an overview of the support concept for the current licensing system:

- HSQA IT personnel maintain the application, database structure, and data.
- The application and database are designed to operate in a Windows 2000 environment, with the operating system being Windows 2000 Advanced Server and the database Microsoft SQL Server 2000. The database resides in the HPQA data center, 1300 SE Quince until May 2004, when the system will be moved into the DOH new Data Center located at Town Center in Tumwater.
- No special tools are used to maintain the system.
- Record retention schedules vary dependent upon the type of data involved. Responsibility for ensuring the appropriate schedules are adhered to will remain with HSQA IT.

Description of needed changes

Replacement and integration of the core functions currently provided into an integrated Licensing and disciplinary system:

- Align with the agency's strategic direction for database management systems
- Align with the agency's Strategic direction for application programming
- Reduce system support
- Improve access to basic data by division personnel
- Eliminate redundant data
- Eliminate inconsistency between separate databases resulting in reporting errors and human effort required to resolve inconsistencies
- Provide timely, efficient processes to capture and report data.
- Provide a system capable of growth and scalability
- Provide a system capable of linking facilities and provider data
- Provide a system capable of system edits to ensure data integrity

Assumptions and constraints

- Funds will be available and/or spending authority appropriated
- Legislative changes will not significantly impact the project scope
- Business process changes will be required
- Availability and commitment of business and technical staff
- Senior management is committed to support the project
- Agency IT staff will work in partnership

Identification

FSL Licensing System

Description of current system or situation

DOH currently maintains several formal and informal systems to address the functionality associated with facilities & service licensing systems. Current formal systems are server based (with client components for remote, disconnected functionality) and utilize FoxPro and Access based systems. The specific problems associated with the existing systems include:

- Inability to easily access basic Facilities & Services Licensing (FSL) data by division personnel
- Redundancy in Facilities & Service Licensing data
- Inconsistency between separate databases resulting in reporting errors and human effort required to resolve inconsistencies
- Lack of timely, efficient processes to capture and report data dependencies

The Washington State FSL Database System is the system of origin for most of the facilities and services licensing data. It is from that source, via redundant data entry into the Automated Survey Processing Environment (ASPEN) application, (mandated by the Federal Health and Human Services, Center for Medicare and Medicaid Services (CMS)), that the reporting of Health Care Facility Surveys is accomplished.

- Current system details:
There are interfaces to external systems (other agencies, etc.). Laboratory Quality Assurance files are transferred to the following organizations: Proficiency Testing Companies and the federal Electronic Proficiency Testing Data Center.
Total size of data (e.g. database or total size of files/ documents): 12 MB
Annual rate of growth (percentage of data expansion/yr): 5 %
Record retention period (when data is archived/purged from system): 7 yrs
Record retention archive method:
☐ Automated
☒ Manual
- System does not use a Geographic Information System (GIS), e.g. to analyze geographic attributes or spatial relationships.
- Data is not displayed on a hard copy or web-enabled map.

Support concept

Following is an overview of the support concept for the current licensing system:

- HSQA IT personnel maintain the application, database structure, and data.
- The application and database are designed to operate in Client server environment, with the operating system being Novell or Windows NT. The database is FOXPro and resides in the central DOH data center located at Town Center in Tumwater,
- No special tools are used to maintain the system.
- Retention schedules vary dependent upon the type of data involved. Responsibility for ensuring the appropriate schedules are adhered to will remain with HSQA IT.

Description of needed changes

Replacement of an older technology system to accomplish the following **core licensing** functions:

- Align with the agency's strategic direction for database management systems
- Align with the agency's Strategic direction for application programming
- Reduce system support
- Improve access to basic data by division personnel
- Eliminate redundant data
- Eliminate inconsistency between separate databases resulting in reporting errors and human effort required to resolve inconsistencies
- Provide timely, efficient processes to capture and report data.
- Provide a system capable of growth and scalability
- Provide a system capable of linking facilities and provider data

- Automate system-wide recurring business functions:
 - Batch processing of revenue upload
 - Batch processing of credential print
 - Batch processing of recurring reports
- Provide a system capable of system edits to ensure data integrity

Assumptions and constraints

- Funds will be available and/or spending authority appropriated
- Legislative changes will not significantly impact the project scope
- Business process changes will be required
- Availability and commitment of business and technical staff
- Senior management is committed to support the project
- Agency IT staff will work in partnership

Identification

Emergency Medical Services (EMS) Data System

Description of current system or situation

The current system for the Office of Emergency Medical Services and Trauma System (OEMSTS) is isolated from other licensing functions within DOH. Certified EMS personnel may also be credentialed in other professions without the knowledge of OEMSTS. Disciplinary action taken on these credentials may not be known across programs. There is no electronic means of tracking case review files through the investigative and adjudicative processes.

- Current system details:
 There are no interfaces to external systems (other agencies, etc.).
 Total size of data (e.g. database or total size of files/ documents): 150 MB
 Annual rate of growth (percentage of data expansion/yr): 5 %
 Record retention period (when data is archived/purged from system): 70 yrs
 Record retention archive method:
☐ Automated
☒ Manual
- System does not use a Geographic Information System (GIS), e.g. to analyze geographic attributes or spatial relationships.
- Data is not displayed on a hard copy or web-enabled map.

Support concept

Following is an overview of the support concept for the current licensing system:

- HSQA IT personnel maintain the application, database structure, and data.
- The application and database are designed to operate in Client server environment, with the operating system being Novell or Windows NT. The database is ADBM and resides in the central DOH data center, 1300 SE Quince until May 2004, when the system will be moved into the DOH new Data Center located at Town Center in Tumwater,
- No special tools are used to maintain the system.
- Retention schedules vary dependent upon the type of data involved. Responsibility for ensuring the appropriate schedules are adhered to will remain with HSQA IT.

Description of needed changes

Replacement of an older technology system to accomplish the following **core licensing** functions:

- Align with the agency's strategic direction for database management systems
- Align with the agency's Strategic direction for application programming
- Reduce system support
- Improve access to basic data by division personnel
- Eliminate redundant data
- Eliminate inconsistency between separate databases resulting in reporting errors and human effort required to resolve inconsistencies
- Provide timely, efficient processes to capture and report data.
- Provide a system capable of growth and scalability
- Provide a system capable of determining all credentials held by a practitioner at a glance
- Automate system-wide recurring business functions:
- Provide a system capable of system edits to ensure data integrity

Assumptions and constraints

- Funds will be available and/or spending authority appropriated
- Legislative changes will not significantly impact the project scope
- Business process changes will be required
- Availability and commitment of business and technical staff
- Senior management is committed to support the project
- Agency IT staff will work in partnership

APPENDIX B: NEW OR MODIFIED SYSTEM; The “After” picture...

Description of proposed system

HSQA desires the most advanced system available for the operation of health care professional and facility licensing and disciplinary functions. This system must easily automate labor-intensive tasks through an understanding of decision processes that support the licensing, renewal, complaint and disciplinary processes.

- Initial application and issuance
- Automated renewal processing
- Complaint and disciplinary processes
- Continuing educational requirements
- Lockbox system for maintenance and accountability of revenue
- Automation of correspondence for license processing and complaint functions
- Field-oriented operator prompting and editing
- Ability to accept input from outside service providers, such as external contracted testing services

The system must also be scalable to allow for potential growth and functionality to include:

- Document imaging
- Public access to related regulatory information
- Public access to license processing/issuance status
- Online license applications and renewals
- Adding functionality in a modular fashion either by integrating/linking existing systems or enhancing features made available by the vendor or other third parties
- Access/use of source code
- Planned system details:

Total size of data in gigabytes (e.g. database size or total size of files and documents):

40 GB

Annual rate of growth (percentage of data expansion/yr): 8 %

Record retention (when is data archived/purged from system?): 7-70 yrs based on varying program requirements.

Record retention archival method:

☐ Automated

☒ Manual

- There are no plans for analyzing geographic attributes or spatial relationships using GIS.
- There are no plans for display data on a hard copy or web-enabled map.
- Disaster recovery information:
Recovery Point Objective (RPO): 24 hours
Recovery Time Objective (RTO): 24 hours

Support concept

- HSQA IT staff will maintain the application
- HSQA IT staff will maintain the data
- The application will reside on an HSQA designated server within the central DOH Data Center
- The database will reside on an HSQA designated server within the central DOH Data Center

- It is not anticipated that special tools be used to maintain the system
- Programming language is expected to be in SQL and .Net Framework.
- MS SQL 2000 or higher database management system will be used

Operational requirements

A consolidated list of operation requirements is provided in the BAA and includes the following functional areas:

- Application and Fee Process
- License Tracking (Including Exceptions & Enforcement)
- Survey Scheduling and Reporting (on site inspections)
- Complaint Process
- Adjudicative Process
- Medical Facility Construction Review Process
- Certificate of Need and Regional Planning
- Training, Examination and School Tracking
- Bond Tracking
- Revenue Interfaces
- Security and System Administration
- Access to Source Code
- Modular Functionality
- Financial Reconciliation Process

Impacts during development

This acquisition seeks to find a Commercial-Off-The-Shelf (COTS) solution. There may be a need to consider minor development projects to establish appropriate interfaces with federal reporting systems and agency revenue processes.

Impacts during Implementation

- Availability of staff
 - For business issue resolution
 - For testing/evaluation/implementation
 - For training
 - For data conversion/cleanup
- Availability of equipment and infrastructure
- Availability of vendor
- Changes in business rules and procedures
- Availability of training facility
- Dual entry and parallel processing
- Strong executive sponsorship and participation
- Interfaces to other systems
- Legislatively mandated changes during implementation

APPENDIX C: PROJECT PLAN

For Level 2-3 Projects per the Risk & Severity Assessment

Critical Success Factors

- Consistent executive support
- Budget determined and approved
- Deliverables met in a timely manner
- Selection of best proposal, system and vendor
- Advanced data preparation and conversion
- Staff commitment and participation
- Timely communication
- Successful system implementation and user acceptance
- Stakeholder and advisory group support and involvement
- Strong change management controls

Deliverables

Major project deliverables include:

- HSQA Business Area Analysis
- Feasibility Study
- IT Portfolio and Investment Summary
- RFQQ for software procurement
- Project Plan
- Communication Plan
- Data Cleanup Plan
- Data Conversion Plan
- Risk Mitigation Plan
- Training Plan
- Testing and Acceptance Plan
- Implementation Plan
- Implementation of a new system
- User and System Documentation
- Archive old system

Milestones and Reviews

- | | |
|-------------------------------------|---------------|
| • HSQA Business Area Analysis | June 2004 |
| • Feasibility Study | December 2004 |
| • Investment Plan | December 2004 |
| • Select software vendor | November 2005 |
| • Test and Acceptance of new system | February 2006 |
| • Data Conversion | June 2006 |
| • Complete Implementation | June 2007 |

Project Roles

Executive Sponsor: Laurie Jenkins

Project Champion: Sue Shoblom

Project Manager: Gary Schricker

Project Members: Project members are yet to be determined. Project members will include program staff from three separate HSQA offices demonstrating a thorough business knowledge,

understanding of existing automated systems, logical and creative thinking skills, and a willingness to embrace change in business processing functions and rules.

Business Manager: To be named

Steering Committee Members:

- Laurie Jenkins
- Sue Shoblom
- Bonnie King
- Gary Bennett
- Kris Sparks
- Janet Griffith
- Al Bloomberg
- Gary Schricker
- Frank Westrum
- Gene Robbins
- David Koch, DIS

Stakeholders:

Internal

- HSQA Program Areas

External

- Boards, Commissions and committees

Advisors: Jennifer McNamara, Dan Francis, Pat Collins, Sandra Dlugozs, Bill Norris

Responsibilities

Department of Information Services, Management Oversight Strategic Technologies (MOST) -
Provides independent oversight for project

- Provide project steering committee with DIS expectations and guidelines
- Advise steering committee and Project Manager of concerns regarding status or risks
- Communicate findings and recommendations about project to the Information Services Board, the Office of Financial Management, and the executive sponsor as appropriate
- Advise Project Manager of recommendations focused on project success
- Nonvoting member of project steering committee

Project Steering Committee - *Sets policy direction for project*

- Review and approve project management plan
- Review and approve project strategies and direction
- Represent the interests of stakeholders at large
- Set priorities for work to be done
- Assist in securing and monitoring financial resources
- Approve scope and purpose of project
- Assist in managing major issues that involve changes to the programs as a result of new systems or policies
- Review project progress, status, and key deliverables
- Provide advice and recommendations to Executive Sponsor and Project Manager that are

- focused on project success
- Share project information with other stakeholders and program staff
- Resolve major project issues

Executive Sponsor - *Provides overall strategic direction to project*

- Primary representative to the Information Service Board, Department of Information Services and Office of Financial Management
- Review and approve major project products
- Provide agency executive decision making on critical issues
- Empower Project Champion

Project Champion - *Provides overall tactical direction to project*

- Champion project and the team
- Chair project steering committee
- Manage project scope
- Ensure sustained buy-in for project
- Clear obstacles and road blocks
- Ensure project benefits are realized
- Empower Project Manager and Business Manager
- Ensure policy issues are resolved in timely manner
- Provide necessary time to meet commitment to role and responsibilities as project champion
- Approve project budget
- Ensure project staff is available to complete task.

HSQA Program Directors - *Owner of all data systems within the Division*

- Protect the data systems as invaluable assets within the Division, vital to support public health
- Ensure systems stability and data integrity to support public health decisions
- Develop strategic approach to data systems that uses program resources effectively and efficiently
- Identify the program resources needed to develop detailed program requirements, to test applications to ensure they meet business needs, and to approve acceptance of the applications that meet business needs, on owner's behalf
- Support training activities for all staff using the new system
- Support change management controls
- Actively participate in steering committee

HSQA Information Management Steering Committee - *Assures that data and information are recognized as valuable resources within the Division.*

- Communicate information management issues between program staff and management team
- Provide program user input to the steering committee regarding project prioritization
- Coordinate work requests generated in program area
- Develop program policy recommendations

Quality Assurance Contractor - *Regularly reviews project plans and strategies to ensure project*

success

- Work closely and pro-actively with Project Manager, Business Manager, and team to review and assess all components of project
- Provide recommendations for improvement or mitigation to manager and/or executive sponsor
- Report independently to Project Champion

HSQA Program Staff - Owns the quality of the licensing system and data contained within it

- Provide program expertise to identify requirements to ensure system meets program needs
- Participate in process review and improvement activities
- Provide timely, high quality input to the project
- Provide supportive environment for project interactions
- Support change in processes and procedures to improve overall effectiveness and efficiency of programs
- Assure that system/data weaknesses or concerns are brought to the project staff's attention

Project Manager - Plans, directs and manages the project resources to accomplish plan on time and in budget

- Partner with the Business Manager
- Develop project management plan
- Monitor project budget
- Provide accurate, timely reporting to project champion and steering committee
- Support needs of steering committee members and meetings
- Implement policies and directions set by project sponsor and steering committee
- Hire/supervise project staff
- Establish project standards and procedures
- Establish and convey expectations to staff and contractors
- Coordinate communication with program and technical areas
- Manage project contracts
- Identify issues and appropriate resolution process
- Assure project deliverables have high quality
- Identify and mitigate project risks
- Represent project interests with stakeholders
- Recognize good performance
- Create productive work environment that recognizes and supports individual styles and differences
- Coordinate and schedule meetings to ensure progress exceeds or maintains project schedule commitments

Business Manager - Plans, directs and manages the business resources to accomplish plan on time

- Partner with the Project Manager
- Coordinate integration of business transactions with the system
- Develop business re-engineering plans
- Determine business rules for the system
- Identify and mitigate business risks

- Hire/supervise training and testing staff
- Develop and coordinate training plan and materials
- Develop user training manual
- Develop and coordinate testing plan
- Develop business policies and procedures for the new system
- Develop definitions and data dictionary
- Develop and coordinate the customer support plan during implementation
- Identify issues and appropriate resolution process
- Develop communication plan for the project
- Manage change control process with Project Manager

Project Staff - Prepares assigned deliverables that meet or exceed quality expectations

- Develop personal expertise in areas of responsibility
- Listen to and understand needs of customers
- Produce quality deliverables that meet customers needs on time
- Actively participate in issue identification and resolution
- Increase personal productivity through process review and improvement
- Identify and eliminate barriers that inhibit working efficiently and effectively
- Raise issues to appropriate person for resolution or assistance when needed
- Accountable for personal assignments/behavior
- Commitment to co-workers and team
- Attend meetings of the project team to discuss task area status and issues
- Identify and resolve issues that place the completion of work or quality at risk
- Develop alternatives to mitigate the risk
- Review and provide comments to project manager on written deliverables
- Conduct discovery and assessment

Project Advisors – Provides DIRM oversight and agency coordination for project

- Participate in project development
- Provide advice and recommendations to project team that are focused on project success
- Provide technical guidance and support
- Provide cost estimates for required infrastructure
- Participate in and make recommendations when appropriate to resolve issues
- Assist in scope management
- Provide appropriate deliverables to project lead/manager
- Ensure DIRM application and network support activities, as appropriate

Communication Management

Purpose

The purpose of the Communications Plan is to define what communications will take place during the course of the project. The plan defines these communications as to type, form, frequency, responsible party and intended purpose.

Milestone Reports

At the completion of each project milestone, the Project Manager will create a report summarizing the project's status in regard to reaching the milestone. The report will cover the planned and actual resources expended to reach the milestone. The Project Manager will report

on the deliverables completed and the tasks and deliverables to be completed in reaching the next milestone.

Project Plan

The Project Manager will keep the project plan current for all planned activities. The plan will be posted in the Project Manager's office and will be available on-line in the project's shared directory. The plan will be kept in MS Project.

Project Repository (Shared Directory)

All working documents, status reports, project plans, timesheets, completed deliverables, deliverables in progress, and other written communications will be stored in their electronic format in the project's shared directory at \\hub2\core\share\projects\hsqa_license or subdirectories below the HSQA directory.

Status Reports

A weekly status report will be created by the Project Manager and distributed to the Project Champion, Project Steering Committee, Program Area Managers, and Project Team Members by the close of business on the Monday after the reporting period. The report will include items completed during the current reporting period, items being worked on, items to be completed during the next reporting period, and items of issue or concern.

Status Update Discussions

Monthly meetings will be held with the Project Champion, Project Steering Committee, Program Area Managers, and Project Team Members to review and discuss project progress and deliverables development. Ad Hoc meetings will be called if needed for resolution of issues. Monthly budget summaries, expenditure reports and variance reports will be given to the Project Champion and Project Steering Committee. Quarterly meetings will be held with the Executive Sponsor and the Project Champion and selected project staff to discuss project progress and deliverables development.

Time Sheets

Each contracted project team member will report his/her hours worked during the past week to the Project Manager. The Project Manager will keep a worksheet of the combined work hours by week and to-date. The report will also include remaining balances.

Visibility and Awareness

The Project Manager will create a brief summary of accomplishments and activities of the past month and distribute it to all HSQA staff in an electronic mail message.

Communications Matrix

The following table outlines the communication events that will occur to support the Integrated Licensing and Regulatory System.

Event	Communicator	Audience	Channel	Timing
Business Area Analysis	Project Champion	HSQA Staff	Email	Jan 04
Feasibility Study	Project Champion Project Manager	HSQA Staff	Email DOH Sentinel	Jun 04
Selection of Project Manager	Project Champion	HSQA Staff	Email DOH Sentinel	Jul 04
Selection of Business Manager	Project Champion	HSQA Staff	Email DOH Sentinel	Jul 05
Selection of Quality Assurance Vendor	Project Champion	HSQA Staff	Email	Jul 04
Data Cleanup Process	Project Manager	HSQA Staff	Email	Jul 05
Release RFQQ	Project Manager Project Champion	HSQA Staff Contract Staff Senior Mgt Tm DIRM Stakeholders Advisory Groups	Email	Sep 05
Selection of Software Vendor	Project Manager Project Champion	HSQA Staff Contract Staff Senior Mgt Tm DOH Sentinel DIRM Stakeholders Advisory Groups	Email DOH Sentinel	Nov 05
Project Plan	Project Manager Project Champion	HSQA Staff DIRM Stakeholders Advisory Groups Senior Mgt Team	Email	Begin Jul 05 & Update Monthly
Project Newsletter	Business Mgr	HSQA Staff Stakeholders Advisory Groups	Email or Web site	Monthly
Selection of a Training Team	Business Mgr	HSQA Staff	Email or Web site	Jan 06
Selection of Advisory/Implementation Committee	Business Mgr	HSQA Staff Stakeholders Advisory Groups	Email	Jan 06
Data Conversion Process	Project Manager Business Mgr	HSQA Staff	Email	Jan 06
Testing Process and Schedule	Project Manager Business Mgr	HSQA Staff	Email or Web site	Mar 06
Implementation Schedule	Project Manager	HSQA Staff	Email or Web site DOH Sentinel	May 06
Training Schedule	Project Champion Business Manager	HSQA Staff Stakeholders Advisory Groups	Email or Web site	May 06

Steering Committee Report	Project Manager Project Champion Business Manager	Steering Committee Senior Mgt Tm	Briefing Briefing	Monthly Quarterly
Advisory Committee Report	Advisory Committee Chair	Project Mgr, Project Staff, Steering Committee	Document, Newsletter, or briefing	Monthly
Change Orders	Project Manager	Steering Committee Project Staff	Document	As Required
Project Decisions	Project Champion Project Manager Business Manager	Steering Committee Project Staff	Document	As Required

Risk Management

During the first year of the project, the Quality Assurance consultant will do an assessment of risk. Each quarter, project risks and mitigation strategies will be reassessed. Project Management and team members will monitor these and other potential risks/problems during the project progression so that risks/problems can be detected early and contingency plans can be implemented.

Some of the potential project risks and their mitigation plans are outlined below.

Strategic Risk

Potential Risk

The large effort required by HSQA to be successful combined with the lack of HSQA experience with a project of this magnitude

Mitigation Plan

Extensive coordination with other program areas will be facilitated by the establishment of the steering committee, with representatives from all key stakeholder groups. Clearly defined roles and responsibilities will be established and monitored.

Financial Risk

Potential Risk

Automation benefits need to be controlled and implemented within time and budget to be of benefit to HSQA

Mitigation Plan

Project commitments will be closely monitored by multiple layers of oversight to ensure the project is controlled and implemented to provide maximum benefit to HSQA.

Complexity

Potential Risk

The complexity of client/server development combined with the moderate experience by HSQA staff.

Mitigation Plan

The information technologies will be tested throughout the project. Prototype testing will include all technologies which will be used. A training element for development staff is also included in the project budget. A full time Business Manager will be assigned to the project to address business flow and business re-engineering activities necessary to implement the new system. A User Training Coordinator will develop user training.

Project Planning

Potential Risk

The Executive Sponsor and other user/stakeholders have multiple demanding responsibilities and may find it difficult to stay involved to the level required for successful project completion.

If quality assurance of project deliverables is inadequate, rework may be required or the system may not be as well constructed as it should be.

Mitigation Plan

Project Champion and User/Stakeholder involvement are currently high and will remain so because of the benefits, which will be derived from the system. They will review deliverables at key project milestones.

Quality Assurance will be an integral role in helping to ensure project success. Quality Assurance will be performed on an on-going basis by the project team and project business managers. Independent quality assurance will be provided by a QA consultant.

Project Resources

Potential Risk

Finding and retaining the technical staff needed to develop an application of this size and managing a project team of this size are potential areas of risk.

Additional project management risks are likely when all technical resource staff do not report to the project or are not controlled by the project, such as those resources within DIRM.

Mitigation Plan

The project manager is experienced in human resource management. HSQA management will support the project manager in recruitment and retention strategy development. In addition, the DOH convenience contract will be used to augment staffing as needed. For the Rules and Regulations development phase, a well-managed, advance RFP process will be critical to mitigating this risk.

Coordination between DIRM and HSQA project staff will remain high. The DIRM CIO will actively participate on the project steering committee. Regular project meetings will be established, if needed to improve communications between all technical resources.

Change Management

Potential Risk

Changes or "scope creep" often impede timely project completion.

Mitigation Plan

A change control process will be implemented to assess and monitor changes.

Operational Risk

Users may not be able to maintain an appropriate level of project involvement and meet ongoing business processes

Staff involvement strategies will be developed in conjunction with, and supported by, the Division management team. They will help balance the degree of needed involvement to assure success of the project. Full time re-assignment of experienced business staff to the project will be made, when necessary.

Risk mitigation will incorporate several essential elements, including, but not limited to the project management strategies listed below.

Documentation Control

Project management will establish documentation policies and procedures to be followed by staff while planning, developing, testing, training, or reporting within the project. One staff position will have the primary responsibility to prepare the necessary policies and procedures and will address the approach the project will take to document version control. This position will also have primary responsibility to establish a reference repository for documents such as project deliverables, correspondence, policies, meeting materials, system documentation, and records retention.

Electronic versions of these project documents will be maintained on the local area network on a shared drive in a directory established for finalized documents. The directory will provide "read only" access to these documents. Hard copies of documents that are not available electronically will be maintained and available for easy reference within the project. A comprehensive listing of all documents available within the project will be maintained and available on the shared drive.

Decision Tracking

A decision tracking application will be maintained by a member of the project team. Decisions made within the project, by the Project Champion, the steering committee, advisory committee, DIS, OFM, or the ISB will be captured within the system. Any changes proposed to the project scope will be captured within the system. The application has been designed and is ready to use on the desktop.

Configuration Management

All system changes will use the following sequence, Development, then Test/QA and finally Production.

Configuration Management throughout this project will use Seapines Source Control Management (SCM). This configuration management database is maintained by DOH staff.

Designated project staff will accomplish day to day management associated with the project database repository. Backup and recovery procedures will be accomplished by DOH staff. Contract developers developing outside the DOH environment are allowed to use their own software i.e. Visual Source Safe, provided that by the time the development progresses to QA, all source code will be delivered to DOH for incorporation into SCM as changes occur. The method of delivery will be determined on a case by case basis.

Change Management / Issue Tracking

All system changes will use the following sequence, Development, then Test/QA and finally Production. Change Management/Issue Tracking throughout this project will use Seapines Test Track Pro (TTPro). The TTPro database(s) are maintained by DOH staff. Designated project personnel will accomplish day to day management associated with this application/database to include management of information into and from this tracking system. Information from this system will be used as one of the primary means of communicating open and completed status of all entries entered into the system.

Change Control

The scope of the project will be limited to those activities identified in the project description and will not include any other system modifications or activities outside of that scope. It is the responsibility of the project champion, project manager, and business manager to ensure that the scope of the project is not inadvertently changed or increased through informal actions. Requests for any change in scope will be referred to the steering committee for decision. All requested changes and actions taken in response to the request will be tracked through the decision tracking system within the project.

Quality Control/Quality Assurance

The HSQA Licensing Project will select an independent consultant to provide quality assurance services to the Project Manager and the executive sponsor. The external consultant will review the plans, activities and progress of the project and prepare a written report on the findings and recommendations on a quarterly basis. The Quality Assurance Consultant will work closely with the Project Manager and the project team on suggested actions to improve the effectiveness and efficiency of the project. The Quality Assurance Consultant may be asked to participate in the Steering Committee, or other meetings as necessary.

The Quality Assurance Consultant will have direct access to the executive sponsor and may report independently on areas of concern or high risk that would be appropriately handled only by the executive sponsor.

The Quality Assurance Contractor will conduct an independent risk assessment on the HSQA Licensing Project prior to the start of the project. The Project Manager will prepare an action plan addressing the risk mitigation to be initiated as a result of the assessment. Other risk assessment activities may be pursued as circumstances change.

Test plan will be developed and testing will be conducted to assure quality and functionality of project deliverables are realized prior to implementation.

Work Breakdown Structure/Schedule

May 2004 - June 2004

- Create Information Technology Proposal (ITP)
- Review Business Functions and Process Flows (BAA)
- Create initial timelines and costs for project
- Create communication plan
- Obtain DOH authorizations for project

Decision Package**May 2004 - June 2004**

- Complete BAA
- Develop Decision Package
- Develop initial Funding and Investment Strategy
- Develop ITP Portfolio
- Conduct initial briefing to DIS and OFM

Project Management**July 2004**

- Select Project Manager
- Select Quality Assurance Vendor

Feasibility Study**July 2004 - December 2004**

- Create Final Investment Strategy for DOH, OFM, and DIS
- Review RFI from FSL study of September 2002
- Create timeline, and costs for project
- Develop initial plan for cleaning data
- Develop payment strategy
- Develop Investment Plan (subset of Feasibility Study)
- Obtain authorizations (ISB and OFM) to continue with project

Implementation Strategy**July 2004 - Jun 2005**

- Finalize data cleanup strategy
- Develop initial data conversion strategy
- Develop initial training strategy
- Revise project timeline as needed
- Finalize communication Plan
- Prepare Outsource contract for RFQQ and evaluation

RFQQ**July 2005 – November 2005**

- Develop and release RFQQ
- Develop evaluation criteria
- Evaluate RFQQ responses
- Select software vendor
- Sign contract

Procurement of Hardware and Software**November 2005 –December 2005**

Procure hardware
Modify implementation timeline & project costs based on vendor selection
Finalize data cleanup plan

Data Conversion, Testing, and Implementation

January 2006 – June 2007

Implement software in test environment
Acceptance of System
Run test cases
Convert data for implementation
Finalize Training plan and classroom environment
Develop training materials
Finalize Implementation plan
Implementation and training

Repeat converting data, training user, running in production until all the professions and facilities have been converted and moved into production.

Review

June 2007

- Lessons learned
- Archive old system
- Close project
- Celebrate success

APPENDIX D: PROPOSAL EXHIBITS

Not Applicable

APPENDIX E: PROPOSAL ASSESSMENT

Policies, Standards & Guidelines Assessment

Per ATOM Requirements Step 2.3, identify state policies, standards, and guidelines that apply to proposal:

- ☐ E-Commerce Feasibility Study
- ☐ Core System Feasibility Study
- ☐ Investment Policy & Standards Compliance
- ☐ Records Retention Compliance

If and when the use of online license renewal functionality is considered, including credit card payment for services, an E-commerce Feasibility Study may be required. As a level 2 project, an investment plan must be submitted for DIS oversight and approval. Any bid document must be reviewed by prior to release. Records retention schedules must be established for all system data and, if possible, automatic archival of records should occur in accordance with set schedules.

Assuming agreement with these suggestions, recommend approval of this proposal.

Jennifer McNamara

May 25, 2004

GIS and Data Architecture Assessment

Per ATOM Requirements Step 2.3, review statewide and agency architecture to recommend data structure integration/non-duplication with existing environment, IT standards and protocol direction. Per ATOM Requirements Step 2.6, evaluate other projects, systems, and communities of interest for overlap and/or impact and identify recommendations.

First, I want to say that I appreciate the way this ITP was completed; I think it was a very good job. Secondly, I agree with Dan's comments in general. Specifically, I wanted to reiterate the necessity to get the data cleanup process planned and started early.

The current data needs to be cleaned so that it can be migrated without issues, then steps should be taken to electronically check the new entries on a continuing basis, or at least to run periodic checks on the newly entered data to ensure it stays clean. Migration of this clean data will be much easier if it is maintained in a clean state. It will take a persistent effort so give you plenty of time to start and complete the process.

The ITP indicates that the HSQA IT staff will handle the applications and data. I wanted to make sure that this means they will be taking care of all the database requirements. I assume that what data refers to, but I want to be certain.

The last thing is that this project is very close to being a level-3 project. That is not to be viewed as a bad thing, but I feel it does mean that every effort should be made to complete all the steps and complete all the documentation as if it were to be under the DIS authorization umbrella. In this way, there would not be much additional effort needed if it were to be deemed a level-3 project. This could happen very easily if either the time slips after the project starts or the cost rises for some other reason. We also have a history with a previous attempt at a replacement project that did not succeed so we need to be aware that this might also weigh in a final decision from DIS.

Since the project will be using DOH standards, I see no other particular problems from a data resource viewpoint.

Recommend approval of this ITP.

Gene Robbins, Manager
Data & Applications

Application Resources Assessment

Per ATOM Requirements Step 2.6, evaluate other projects and systems for overlap and/or impact and identify recommendations.

I feel the data clean-up effort should have a much more aggressive timeline than what is depicted here. This effort should be at least two phases: One being the generation of tools and routines to clean-up and validate existing data. This would include automated processes to screen data currently being entered into the current systems. This should be in place very soon. Phase Two will incorporate the Migration of existing data into the new system. The key word here is **MIGRATION**. This obviously cannot be accomplished until the hardware and software for the new system are in place.

Under the provisions set forth in the ATOM and in the CORE Framework published by DIS a requirement is to assess overlap of the proposed system with existing and proposed systems within the organization as well as determining like functional requirements. This system has overlap with other DOH Divisions in regards to the functional requirements. No assessment has been made of the requirements for these functional areas. While this is a HSQA effort my feeling are that the agency would not be complying with the guidelines set forth in ATOM and the CORE Framework without at least a high-level assessment of these functional areas with the thought of possible future integration.

This proposal is well documented and thought out. It appears to cover all the details required for HSQA.

Recommend approval for continuance of the initiative.

Dan Francis
Applications Resource Manager
(360)236-4425
Dan.francis@doh.wa.gov

Technical Resources & Architecture Assessment

Per ATOM Requirements Step 2.14:

Determine hardware/software capacity

Conduct analysis and identify technical architecture needs

Conduct system inventory

IT standards and protocol directions

Establish hosting environment

When a vendor and product are selected, recommend including Technical Services staff (Help Desk Manager and TRM Manager) in vendor and program meetings to identify configuration and support strategies.

Diana Herington, Help Desk Manager, 6/11/04

Insufficient information to determine infrastructure equipment assessment or support requirements. It is recommended that Network Services be involved in evaluation of new licensing system to provide technical input regarding hardware requirements to ensure agency standards are met. In addition, under the section, Impacts, Impact on originating DOH program, it is indicated that HSQA staff will not support the infrastructure and this function will be migrated to DIRM staff. There is no indication within the ITP that FTE resources will be allocated from HSQA to DIRM in order to accomplish this support. DIRM does not have the resources to assume this function without appropriate FTE resources being reallocated from HSQA to DIRM to ensure support for the new licensing system.

Assuming agreement with the above exceptions, recommend approval of this proposal.

Bill Norris, Technical Resource Manager, 6/11/2004

Security Assessment

Per ATOM Requirements Steps 2.10, 2.31, perform and insert security assessment:

- ❑ Review security policies, standards, and guidelines for compliance
- ❑ Initiate appropriate secure access (Fortress, Transact WA, etc.)
- ❑ Identify security needs including digital signature/certificates
- ❑ Identify security/firewall proximity issues

The data confidentiality assessment identified the collection and storage of individually identifiable patient and patient demographic data. In addition, medical diagnosis and medical facility data may also be included. The department and program area recognizes this data as confidential and sensitive. As such, a high level of protection is required to meet department and statewide security requirements for fielding an application of this nature. Since the vendor has not been chosen for this project, a complete security assessment cannot be performed. Based on the general information provided, the following security assessment is appropriate:

Internal DOH Staff Application Requirements: Client/server applications in the DOH environment, housing this classification of data and authenticating only internal DOH end users are required to have the following protections:

- User ID and password (one factor authentication)
- Encrypted traffic for data transfers
- Encrypted storage of user passwords (if stored in the database)

External Trading Partners Application Requirements: Web-based applications in the DOH environment, housing this classification of data and authenticating both internal and external end users are required to have the following protections:

- Segregated and highly secured environment
- Encrypted traffic
- External strong authentication (e.g. Fortress or Transact Washington authentication gateway)
- Proxy mechanism to protect and translate from the public web address to the private IP address

The IT Security Office reserves the right to re-assess the security requirements once a final vendor has been selected.

Jody Simmonds
IT Security Office
6-10-04

APPENDIX F: COST ESTIMATES AND FINANCIAL PLAN

HSQA Integrated Licensing and Disciplinary Project Cost Estimate and Timeline

Project Tasks	Costs				Total Cost
	Jan 2004 - Jun 2004 -	Jul 04 - Jun 05 -	Jul 05 - Jun 06 -	Jul 06 - Jun 07 -	
Jan 04 - Jun 04					
Business Area Analysis	133,500				133,500
Jul 04 - Dec 04					
Feasibility Study		75,000			75,000
Jul 04 - Jun 07 Project & Business Mgrs					
1 FTE Project Manager (includes benefits)		100,000	100,000	100,000	300,000
1 FTE Business Manager (includes benefits)			90,000	90,000	180,000
Jul 04 - Jun 07					
Quality Assurance		25,000	115,000	60,000	200,000
Jul 04 - Jun 05 (Internal or external work)					
1-2 FTEs and/or contract staff		150,000			150,000
Develop Decision Pkg					
Develop Funding and Investment Strategy					
Develop Data Cleanup Strategy					
Develop Data Conversion Strategy					
Develop Training Strategy					
Develop Implementation Strategy					
Develop Project Timeline					
Finalize Communication Plan					
Obtain ISB and OFM authorization to continue Project					
Prepare Outsource contract for RFQQ and Evaluation					
Catalog side system					
July 05 -Nov 05 RFQQ					
Develop/release RFQQ, Evaluation Criteria, Select Vendor			50,000		50,000
Nov 05 - Dec 05 Procurement of Hardware & Software					
Application software			450,000		450,000
Application Servers (2)			90,000		90,000
Quality Assurance Servers (2)			25,000		25,000
Development Servers (2)			25,000		25,000
Disaster Recovery Equipment and Licenses			10,000		10,000
Imaging system and Storage (Assumes 30 users) *			250,000		250,000
Legal Software **			100,000		100,000
Training Rm Hardware (20 PCs, Server, Printer, Projector, Licenses)			60,000		60,000
Testing Hardware (5 PCs, 1 Printer)			12,000		12,000
Production Spt Hardware (2 PCs)			5,000		5,000
Helpdesk Spt Hardware (2 PCs)			5,000		5,000
Contractor Hardware (5 PCs)			15,000		15,000

Internal Work - 6 FTE Months					
Finalize Data Cleanup Plan					
Finalize Data Conversion Strategy					
Finalize Training Strategy					
Finalize Implementation Strategy					
Finalize Project Timeline					
Modify timeline and costs of project based on vendor selection					
Jan 06 - Jun 07 Data Conversion, Testing & Implementation					
Data Conversion in Dev, QA, then Prod Environment			75,000	225,000	300,000
Implementation in Dev, QA, then Prod Environment			50,000	50,000	100,000
IT Training on Database, tools, etc.			10,000		10,000
Training and Testing Staff (4-5 FTEs) (includes benefits)			100,000	200,000	300,000
Training Room PCs IT support (category T, 20 @ 100/month)			12,000	24,000	36,000
Testers PCs - IT support (category T, 5 @ 100/month)			3,000	6,000	9,000
Trainers/Testers Office Space (5 @ \$350/month)			10,500	21,000	31,500
Training Materials				20,000	20,000
Training Room Configuration - i.e., Hubs/LAN Ports, Power, etc.			10,000		10,000
Production Support (.5 FTE O5, 2 FTEs O6) (includes benefits)			30,000	120,000	150,000
Production Spt PCs - IT support (category T, 100/month/person)			600	2,400	3,000
Production Support Office Space (\$350/month/person)			2,100	8,400	10,500
Helpdesk Spt (.5 FTE O5, 2 FTEs O6) (includes benefits)			30,000	120,000	150,000
Helpdesk Spt PCs - IT support (category T, 100/month/person)			600	2,400	3,000
Helpdesk Spt Office Space (\$350/month/person)			2,100	8,400	10,500
Over Time (.5 FTE O5, .75 FTE O6 @ 1.5X)			35,000	50,000	85,000
Contractor Office Space (6 @ \$350/month)			12,600	25,200	37,800
Contractor - IT support (category T, 5 @ 100/month))			3,000	6,000	9,000
1st year Application License maintenance (15%)				70,000	70,000
1st year Hardware and OS Licenses and Maintenance				20,000	20,000
Change Orders (Modifications and Interfaces)			100,000	100,000	200,000
Acceptance of System			NA	NA	0
Jun 07 – (Internal) 2 staff months					
Review - Capture Lessons Learned					
Archive old system					
Close Project					
Celebrate success					
Division Indirects				??	??
DOH Indirects				??	??
Total Project Cost	\$133,500	\$350,000	\$1,888,500	\$1,328,800	\$3,700,800

* Some costs may be offset with current image system

** May or may not be part of Licensing Software

Note: Costs do not include Agency or Division Indirects

Preliminary Life Cycle & Maintenance Cost Estimates

Item	5 Year Annual Cost Matrix					
	Jul 07 - Jun 08 -	Jul 08 - Jun 09 -	Jul 9 - Jun 10 -	Jul 10 - Jun 11 -	Jul 11 - Jun 12 -	Total 5 Yr Cost
Application License maintenance (15%)	70,000	70,000	70,000	70,000	70,000	350,000
Hardware and OS Licenses and Maintenance	20,000	20,000	20,000	20,000	20,000	100,000
Server Replacement	35,000	35,000	35,000	35,000	35,000	175,000
Change Orders (Modification, Enhancements, Interfaces)	40,000	400,000	40,000	40,000	40,000	200,000
Disaster Recovery Equip and Licenses	3,000	3,000	3,000	3,000	3,000	15,000
Total Maintenance Cost	\$168,000	\$168,000	\$168,000	\$168,000	\$168,000	\$840,000

Note: Costs do not include Agency or Division Indirects

Project FTEs Project Tasks	Costs				Total Cost
	Jan 2004 - Jun 2004 -	Jul 04 - Jun 05 -	Jul 05 - Jun 06 -	Jul 06 - Jun 07 -	
Jul 04 - Jun 07 Project & Business Mgrs					
1 FTE Project Manager (includes benefits)		100,000 1.0	100,000 1.0	100,000 1.0	300,000
1 FTE Business Continuity Manager (includes benefits)			90,000 1.0	90,000 1.0	180,000
Jan 06 - Jun 07 Data Conversion, Testing & Implementation					
Training and Testing Staff (4-5 FTEs) (includes benefits)			100,000	200,000	300,000
05 5 FTEs for the last 6 months of the year			2.5	5.0	
06 5 FTEs for one year					
Production Support (.5 FTE O5, 2 FTEs O6) (includes benefits)			30,000	120,000	150,000
05 1 FTE for the last 6 months of the year			0.5	2.0	
06 2 FTEs for one year					
Helpdesk Spt (.5 FTE O5, 2 FTEs O6) (includes benefits)			30,000	120,000	150,000
05 1 FTE for the last 6 months of the year			0.5	2.0	
06 2 FTE for one year					
Over Time (.5 FTE O5, .75 FTE O6 @ 1.5X)			35,000 0.5	50,000 0.75	85,000
Total Project FTE Cost		\$100,001	\$385,006	\$680,012	\$1,165,000
Total Project FTEs		1.0	6.5	11.75	

- Program staff support estimate: TBD staff, TBD hours = TBD
Internal DOH Project members are yet to be determined. Internal Project members will include program staff from three separate HSQA offices demonstrating a thorough business knowledge, understanding of existing automated systems, logical and creative thinking skills, and a willingness to embrace change in business processing functions and rules. Additional project staff estimates are identified in the Project FTEs matrix listed above.

- DIRM staff support estimate: _____ staff, _____ hours = _____

Following any required feasibility study or design phase, provide detailed cost estimates through the remaining project phases to support ongoing maintenance of the system. As costs are more accurately identified, update this document to reflect the latest information.